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Potbellied Porcine Pets

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Although the remarkable popularity of the Vietnamese potbellied pig has been gradually decreasing, there are still regular appearances of this animal in the New Bolton Center appointment books. Calls from referring veterinarians and owners seeking management, surgical, medical, and anesthetic advice are frequent. It is our impression that the local practitioners, particularly those who are small animal oriented, are willing to add this unusual companion animal to their client lists and are becoming more confident and proficient in diagnosis, treatment, and surgery of the Vietnamese potbellied pig (VPBP).

Some of the most frequent questions we receive pertain to basic information and management of the VPBP. We have included in this article an overview of proper care and nutrition of these animals, as well as a few comments on preventive medicine, anesthesia, and surgery, which will be offered in this article.

Prices for VPBP's have been falling, and many people with no animal experience are buying them on a whim. Many of these owners do not understand that the small pig they purchased at six weeks of age may grow to 80 to 120 lbs., depending on sex and genetics. Some of these pigs may be crossbred with domestic breeds, and may therefore grow larger. A wide variety of colors and markings are now available; the original VPBP's were medium-sized, black, and hairy. Typically, the female is larger than the male, but both mature at about four to six months of age. A common owner complaint is inappropriate (for a pet) sexual behavior at the onset of sexual puberty. The estrus cycle in the female pig is 19 to 22 days, and heat can last anywhere from 12 to 48 hours. Female VPBP's may become very aggressive, when in heat, and frequent problems include property destruction and biting. Male sexual behavior is somewhat more benign, but may include excessive attachment to owner's legs. Since most owners are not interested in breeding, neutering procedures are usually recommended. These will be covered later.

Proper (limited) growth of the VPBP depends on a properly balanced diet. Many feed stores now stock special miniature pig feed (Mazuri Porcine Feed – Purina), which is palatable and high in fiber. Maintenance feed should be a 12% protein ratio at 2-3% of body weight. The amount fed should be tailored to the pig's condition and use. Obesity is a significant problem in VPBP's, and excess feeding of "treats" must be discouraged. Appropriate snacks are low in calorie and high in fiber, such as pieces of apple, banana, or unbuttered popcorn, fed in small amounts. Specific nutritional deficiencies are not common in pigs fed diets specifically formulated for swine. Calcium/phosphorus imbalance should be suspected, however, in cases of spontaneous fracture, "downer pig", or non-specific lameness. Vitamin E and selenium are present in commercial feed in adequate amounts, but if it takes a long time to use the feed, the Vitamin E content may be reduced. Signs of Vitamin E/selenium deficiency may include sudden death in piglets or weakness typical of "white muscle disease." Iron deficiency is a problem in newborn domestic pigs. and many practitioners will supplement newborn VPBP piglets with injectable iron (100 mg/lb. IM), although there is a risk of sudden death with this treatment.

Exercise is an important part of management, and must be stressed to new owners. VPBP's usually play well by themselves or with other pets. Occasionally rooting is a problem. Recommendations include limiting to leash walking, or placement of nose rings. A single ring in the nasal septum tends to pull out easily, so placement of two rings, one in each nostril, is preferred.

The most common surgical procedures done at New Bolton Center are ovariohysterectomy and castration. Both procedures are easily accomplished using techniques developed for small animals.

Cesarean section may be performed. In cases of partial or complete lactation failure, or death of the sow, piglets may be maintained on sow milk replacer, goat or cow milk, or infant formula, at 10 to 15 ml's every three hours. After about a week, the piglets should be able to drink from a pan or bucket.

Finally, a vaccination regimen that may be suggested includes, at 4 to 6 weeks of age, erysipelas bacterin and 5-way lepto spirosis bacterin. If the pig is in a large or crowded herd, atrophic rhinitis vaccination may be recommended. The erysipelas and leptospirosis bacterin should also be given, and boostered yearly with the erysipelas bacterin. The leptospirosis bacterin should be boosted every 6 months in the "outdoor" pig. Breeding stock should receive immunization for porcine parovirus. Fecal exam should be performed every 6 months, and VPBP's may be dewormed with pyrantel pamoate (0.10 ml/lb. po). Ivermectin (Ivomec® 0.02 ml/lb subQ) and dichlorvos may be used in adult pigs.

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Rebecca Dono, sales specialist, Upjohn Company, presents a check to SCAVM President Kenton Resford, V'94, while Leon Andrews looks on.